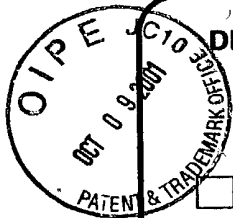


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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐

**Declaration  
Submitted  
with Initial  
Filing**

**OR**

XX

**Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)**

**Attorney Docket Number**

53 130

**First Named Inventor**

Bullock

**COMPLETE IF KNOWN**

Application Number

09 / 886,937

Filing Date

06/21/2001

**Group Art Unit**

Examiner Name

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Shaken not Stirred

(Title of the Invention)

the specification of which



is attached hereto

**OR**

X

was filed on (MM/DD/YYYY)

06/21/2001

as United States Application Number or PCT International

Application Number

09/886937

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

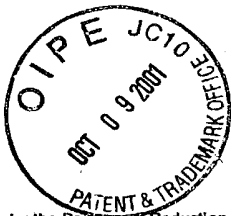
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

application on which priority is claimed.					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
Provisional US Application 60/213,036	U.S.	June 21, 2000	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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PTO/SB/01 (03-01)  
Approved for use through 10/31/2002. OMB 0651-0032  
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**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to: <input type="checkbox"/>		Customer Number or Bar Code Label	30279	OR	<input type="checkbox"/>	Correspondence address below	
<b>Name</b> Garst Seed Company <b>Attn:</b> Dana Rewoldt							
<b>Address</b> 2369 330th Street PO Box 500							
<b>City</b> Slater				<b>State</b> IA		<b>ZIP</b> 50124	
<b>Country</b> U.S.A.				<b>Telephone</b> 551-685-5201		<b>515-685-5072</b> <b>Fax</b>	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
<b>NAME OF SOLE OR FIRST INVENTOR :</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
<b>Given Name</b> William Paul (first and middle [if any])				<b>Family Name</b> Bullock or Surname			
<b>Inventor's Signature</b> <i>William Paul Bullock</i>				<b>Date</b> 9/28/01			
<b>Residence: City</b> Ames		<b>State</b> IA		<b>U.S. Country</b>		<b>U.S. Citizenship</b>	
<b>Mailing Address</b> 424 Oliver Ave.							
<b>City</b> Ames		<b>State</b> IA		<b>ZIP</b> 50014		<b>Country</b> U.S.	
<b>NAME OF SECOND INVENTOR:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
<b>Given Name</b> Kathy Jo (first and middle [if any])				<b>Family Name</b> Cook or Surname			
<b>Inventor's Signature</b> <i>Kathy Jo Cook</i>				<b>Date</b> 9/25/01			
<b>Residence: City</b> Slater		<b>State</b> IA		<b>Country</b> U.S.		<b>Citizenship</b> U.S.	
<b>Mailing Address</b> 107 3rd Avenue							
<b>City</b> Slater		<b>State</b> IA		<b>ZIP</b> 50244		<b>Country</b> U.S.	
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							



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Please type a plus sign (+) inside this box →

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page ____ of ____
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Julie Lynne		Ritland	
Inventor's Signature <i>Julie Ritland</i>		Date 9/28/01	
Residence: City	Hubbard	State	IA
Country	US	Citizenship	US
Mailing Address 17313 330th Street			
Mailing Address			
City	Hubbard	State	IA
ZIP	50122	Country	US
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
John Michael		Gass	
Inventor's Signature <i>John Gass</i>		Date 9-25-01	
Residence: City	Slater	State	IA
Country	US	Citizenship	US
Mailing Address 105 9th Avenue			
Mailing Address			
City	Slater	State	IA
ZIP	50244	Country	US
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	

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